

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1

Information in the shaded areas
is not required by Federal law.

CAD086510005

87137

of 2

3. Generator's Name and Mailing Address

**Douglas Aircraft Company, C1-Q6C (11-11) Attn: Rob Tuell
3855 Lakewood Blvd., Long Beach, CA 90846**

4. Generator's Phone **(310) 496-6287 or (310) 593-3101**

5. Transporter 1 Company Name

6. US EPA ID Number

Laidlaw Environmental Services of CA, Inc. CAD000083121

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

10. US EPA ID Number

**Enasco West, Inc.
1737 East Denny Street
Wilmington, CA 90744**

CAD044429835

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers
No. Type

13. Total
Quantity

14. Unit
Wt/Vol

15. Waste Number

**RQ, Paint related material, 3, UN1263, PG II, (F002,
F003, F005, D001, D007)**

006 DM 02050 P

State **461**
EPA/Other **F002**

RQ, Waste gasoline, 3, UN1203, PG II (D001, D018)

007 DM 02000 P

State **211**
EPA/Other **D001**

**RQ, Hazardous waste, solid, n.o.s., 9, NA3077,
PG III (F002, F003, F005, D007)**

002 BA 01880 P

State **352**
EPA/Other **F002**

**RQ, Hazardous waste solid, n.o.s., 9, UN3077, PG III
(D007, D008)**

001 DM 00075 P

State **352**
EPA/Other **D007**

11a. 520571. Paint Sludge. Additional Codes: F003, F005, D001, D007

11b. 524750. Gasoline contaminated with water (D018)

11c. 520578. Production rags. Additional codes: F003, F005, D007

11d. 520576. Sealant tubes (D008)

12. Handling Codes for Wastes Listed Above

01

01

07

07

15. Special Handling Instructions and Additional Information

**24 Hour emergency telephone number (800) 424-9300 (Chemtrec). DOT ERG# 11a) 26 b) 27 c) 31 d) 31
Site address: 19503 South Normandie Avenue, Torrance, CA 90502**

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable federal, state and international laws.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Month Day Year

Robert G. Tuell, Jr.

Robert G. Tuell, Jr.

01/24/95

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

JACK JOHNSON

Jack Johnson

01/24/95

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

Pat Choomgein

Pat Choomgein

01/30/95

DO NOT WRITE BELOW THIS LINE.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS.
(Generators who submit hazardous waste for transport out-of-state,
produce completed copy of this copy and send to DTSC within 30 days.)

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)		21. Generator's US EPA ID No. CAD086510005	Manifest Document No. 87137	22. Page 2 of 2	Information in the shaded areas is not required by Federal law.	
23. Generator's Name Douglas Aircraft Company, C1-Q6C (11-11) Attn: Rob Tuell 3855 Lakewood Blvd., Long Beach CA, 90846				L. State Manifest Document Number 93387137		
				M. State Generator's ID HAHQ36005698		
24. Transporter _____ Company Name		25. US EPA ID Number		N. State Transporter's ID		
26. Transporter _____ Company Name		27. US EPA ID Number		O. Transporter's Phone		
				P. State Transporter's ID		
				Q. Transporter's Phone		
28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				29. Containers	30. Total Quantity	31. Unit Wt/Vol
				No.	Type	R. Waste No.
a.	HM	Waste flammable liquids, n.o.s., (epoxy resin) 3, UN1993, PG II (D001)		001	DM	00125 P 281 D001
b.	RQ	Hazardous waste solid, n.o.s., 9, NA3077, PG III (D007)		002	DM	00500 P 331 D007
c.	X	Instapack A Non-RCRA hazardous waste liquid		001	DF	00015 P 331 N/R
d.						
e.						
f.						
g.						
h.						
i.						
S. Additional Descriptions for Materials Listed Above 28a. 524751. Adhesives, resins, and hardeners overpacked. 28b. 520573. Paint solids 28c. 520466. Instapack A.				T. Handling Codes for Wastes Listed Above 28A) 07 28B) 07 28C) 07		
32. Special Handling Instructions and Additional Information 24 HOUR EMERGENCY TELEPHONE NUMBER (800) 424- 9300 (CHEMTREC). DOT ERG# 11a) 27 b) 31 d) 31 Site address: 19503 South Normandie Avenue, Torrance, CA, 90502						
33. Transporter _____ Acknowledgement of Receipt of Materials						Date
Printed/Typed Name				Signature		Month Day Year
34. Transporter _____ Acknowledgement of Receipt of Materials						Date
Printed/Typed Name				Signature		Month Day Year
35. Discrepancy Indication Space						



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CAD044429835

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12. Containers
No. Type

13. Total
Quantity

14. Unit
Wt/Vol

Waste Number

a. **RQ, Paint related material, 3, UN1263, PG II, (F002,
F003, F005, D001, D007)**

006 DM 02050 P

State **461**

EPA/Other **F002**

b. **RQ, Waste gasoline, 3, UN1203, PG II (D001, D018)**

007 DM 02000 P

State **211**

EPA/Other **D001**

c. **RQ, Hazardous waste, solid, n.o.s., 9, NA3077,
PG III (F002, F003, F005, D007)**

002 BA 01880 P

State **352**

EPA/Other **F002**

d. **RQ, Hazardous waste solid, n.o.s., 9, UN3077, PG III
(D007, D008)**

001 DM 00075 P

State **352**

EPA/Other **D007**

11a. Additional Descriptions for Materials Listed Above

11a. 520571, Paint Sludge, Additional Codes: F003, F005, D001, D007

11b. 520750, Gasoline contaminated with water (D018)

11c. 520576, Production Residue, Additional codes: F003, F005, D007

11d. 520576, Sealant tubes (D008)

11. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**24 Hour emergency telephone number (800) 424-9300 (Chemtrec). DOT ERG# 11a) 26 b) 27 c) 31 d) 31
Site address: 19503 South Normandie Avenue, Torrance, CA 90502**

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Printed/Typed Name

Signature

Month Day Year

Robert G. Tuell, Jr.

Robert G. Tuell, Jr.

01/24/95

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Jack Johnson

01/24/95

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Signature

Month Day Year

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Signature

Month Day Year

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23. Generator's Name Douglas Aircraft Company, C1-QAC (11-11) Attn: Ron Tuell 3055 Lakewood Blvd, Long Beach CA. 90840				L. State Manifest Document Number 93387137	
24. Transporter _____ Company Name				M. State Generator's ID HAHQ36005698	
25. US EPA ID Number				N. State Transporter's ID	
26. Transporter _____ Company Name				O. Transporter's Phone	
27. US EPA ID Number				P. State Transporter's ID	
28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				Q. Transporter's Phone	
29. Containers		30. Total Quantity	31. Unit Wt/Vol	R. Waste No.	
No.	Type				
a. <input checked="" type="checkbox"/> HM	Waste flammable liquids, n.o.s. (epoxy resin) 3. UN1993, PG II (D001)	001 DM	00125	P	281 D001
b. <input checked="" type="checkbox"/> HM	Hazardous waste solid, n.o.s., 9, NA3077, PG III (D007)	002 DM	00500	P	331 D007
c. <input checked="" type="checkbox"/> X	Instapack A Non-RCRA hazardous waste liquid	001 DF	00015	P	331 NA3
d.					
e.					
f.					
g.					
h.					
i.					
S. Additional Descriptions for Materials Listed Above 28a. 524751 Adhesives, resins, and hardeners overpacked. 28b. 520573 Paint solids 28c. 520465 instapack A.				T. Handling Codes for Wastes Listed Above	
32. Special Handling Instructions and Additional Information 24 HOUR EMERGENCY TELEPHONE NUMBER (800) 424-9300 (CHATTERBOX) DOT ERG 11a) 27 b) 31 d) 31 Site address: 19503 South Normandie Avenue, Torrance, CA, 90502					
33. Transporter _____ Acknowledgement of Receipt of Materials				Date	
Printed/Typed Name		Signature		Month Day Year	
34. Transporter _____ Acknowledgement of Receipt of Materials				Date	
Printed/Typed Name		Signature		Month Day Year	
35. Discrepancy Indication Space					



WORK ORDER

Johnson



221 E. "D" ST. • P.O. Box 1175
WILMINGTON, CA 90748-1175
(310) 518-4700 • (800) 955-5359

CUSTOMER/ACCT. NO

240120

BILLING ADDRESS

DOUGLAS AIRCRAFT
3855 LAKEWOOD
LONG BEACH CA

SERVICE ADDRESS

DOUGLAS AIRCRAFT
190TH X NORMANDIE
TORRANCE CA

WORK ORDER NO.

11209

10079

*Billed 51650417014
paid 93387138 & 93387148
Trans only on paid trans & disposal
93387137*

ORDER DATE 01/20/95	DATE TO BE DONE 01/24/95	CUSTOMER P.O. # 27004-H6301	ORDERED BY FRED / I, T	TELEPHONE# () () () ()	CONTACT PERSON FRED
REP.	DIV. # 516 500	DEPARTMENT TRANSPORTATION	CUSTOMER'S EPA #	CUSTOMER'S BD OF EQUAL #	CONTACT PHONE # () () () ()

PROVIDE 1 40 FT VAN TO LOAD DRUMS FOR DISPOSAL AT ENSCO WEST
CHEM TECH WESTMORELAND

*Torrance: IN 0730
Torrance: OUT 11:30*

DRIVER COMPLETE:

SERVICES PERFORMED LOAD & RETURN TO YARDS.

START TIME 0700

STOP TIME

START MILES 95084

END MILES

TRUCK NUMBER 16042

TRAILER NUMBER 214843

Manifest Number 93387138, 93387137, 93387148 Date Completed 01/24/95 Drivers Name J. JOHNSON

Comments

In the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to reasonable attorney's fees, expenses and costs.

NOT AN INVOICE - BILLING WILL FOLLOW

Customer Signature

Robert S. Inall, Jr. 01-24-95

PRICING INSTRUCTIONS - DRUMS

Clerical _____	Hrs. @ _____	Per Hr. _____
Project Manager _____	Hrs. @ _____	Per Hr. _____
First Technician _____	Hrs. @ _____	Per Hr. _____
Second Technician _____	Hrs. @ _____	Per Hr. _____
Third Technician _____	Hrs. @ _____	Per Hr. _____
Fourth Technician _____	Hrs. @ _____	Per Hr. _____
Fifth Technician _____	Hrs. @ _____	Per Hr. _____
Truck # _____	Hrs. @ _____	Per Hr. _____
Truck # _____	Hrs. @ _____	Per Hr. _____
Truck # _____	Hrs. @ _____	Per Hr. _____

Sundays, Holidays, and After Hours @ _____ % = _____

TRANSPORTATION & DISPOSAL FEES TO TSD FACILITY

_____ 5 Gal. Cans Liquid @ _____	Each
_____ 5 Gal. Cans Solid @ _____	Each
_____ 5 Gal. Cans Lab Packed @ _____	Each
_____ 55 Gal. Drums Liquid @ _____	Each
_____ 55 Gal. Drums Solid @ _____	Each
_____ 55 Gal. Drums Lab Packed _____	Each
_____ Empty 5 Gal. Cans @ _____	Each
_____ Empty 55 Gal. Cans @ _____	Each

County Tax _____

MATERIALS USED

_____ 5 Gal. Cans @ _____	Each
_____ 55 Gal. Drums @ _____	Each
_____ Recovery Drums @ _____	Each
_____ Bags Vermiculite @ _____	Each
_____ Bags (Other Describe) @ _____	@ _____ = _____
_____ Hazardous Waste Labels @ _____	Each
_____ Drum Liners @ _____	Each

Safety Equipment Number of Sets _____ @ _____ = _____

PRICING INSTRUCTIONS - PUMPING

Compensation _____	Hrs. @ _____	Per Hr. _____
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Washout Fee _____

Dump Fee _____

TOTAL _____

Generator Name: Douglas Aircraft CompanyManifest No.: 87137/93387137

Waste Code *	Subcategory	Wastewater	Technology Based Standard 40CFR 268.42 TABLE 2 Wastewater	Non-wastewater	Technology Based Standard 40CFR 268.42 TABLE 2 Non-wastewater	CCW 40CFR 268.43	CCWE 40CFR 268.41	Hazardous Debris	Appen. IV Lab Pack	Appen. V Lab Pack	No Further Treatment	Variance or Extension
<u>F001, F002, F005</u>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>D007</u>	<u>Chromium</u>	<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>D001</u>	<u>High TOC</u>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<u>FSUBS</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>D018</u>	<u>Benzene</u>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<u>FSUBS</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>D008</u>	<u>Lead</u>	<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* For Waste Codes F001-F005, F039, D002 & D001 DEACT, the underlying constituents must be identified, see attached.

- ☐ IF Column A is checked: I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only the wastes specified in Appendix IV to part 268 or solid wastes not subject to regulation under 40 CFR Part 261. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.
- ☐ IF Column B is checked: I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste and that the lab pack contains only organic wastes specified in Appendix V to Part 268 or solid wastes not subject to regulation under 40 CFR Part 261. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.
- ☐ IF Column C is checked: If indicated by "X", the specified waste codes are able to be land disposed without further treatment. In accordance with 268.7(a)(2) and regarding those restricted waste(s) contained in this shipment, these waste(s) may be land disposed without further treatment.

I submit the following certification statement:

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false submitting a false certification, including the possibility of a fine and imprisonment.

- ☐ This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45.
- ☐ This manifest includes controlled benzene waste which is subject to the notification requirements of 40 CFR 61 subpart FF. WMDS # _____

Waste analysis is attached where available, otherwise, the information contained herein is based upon my thorough knowledge of the waste(s).

I hereby certify that all information submitted in this document is complete and accurate to the best of my knowledge and information.

Signature Robert B. Tuell, Jr. Title Sr. Plant Engineer Date 01-24-95



LAND DISPOSAL RESTRICTION NOTIFICATION FORM

Continuation Page

Manifest No.: _____

Waste Code	Subcategory	Wastewater	Technology Based Standard 40CFR 268.42 TABLE 2 Wastewater	Non-wastewater	Technology Based Standard 40CFR 268.42 TABLE 2 Non-wastewater	CCW 40CFR268.43	CCWE 40CFR 268.41	Appen. IV Lab Pack	Appen. V Lab Pack	No Further Treatment	Variance or Extension
_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Variances, Extensions and Other Notes:



Spent Solvent Wastes

(F001-F005)

[] This shipment, as referenced by the above manifest number, contains waste(s) which correspond to USEPA Hazardous Waste Code(s) [] F001, [x] F002, [x] F003, [] F004 and/or [x] F005.

The above referenced waste(s) must be treated to meet the treatment standard expressed as Constituent Concentration in the Waste Extract as outlined in 40 CFR 268.41 Table CCWE or in 40 CFR 268.43 Table CCW below.

(Check each constituent known to be in the waste referenced above)

		-----CCW-----		State of California Standards	
		Wastewaters	Non-Wastewaters	Wastewaters	Non-Wastewaters
		(mg/L)	(mg/Kg)	(mg/L)	(mg/L)
<input checked="" type="checkbox"/>	Acetone	0.28	160	0.05	0.59
<input type="checkbox"/>	Benzene	0.070	3.7	0.070 (CCW)	3.7(CCW mg/Kg)
<input type="checkbox"/>	n-Butyl alcohol	5.6	2.6	5.0	5.0
<input type="checkbox"/>	Carbon disulfide	0.014	N/A	1.05	4.81
<input type="checkbox"/>	Carbon tetrachloride	0.057	5.6	0.05	0.96
<input type="checkbox"/>	Chlorobenzene	0.057	5.7	0.15	0.05
<input type="checkbox"/>	Cresols (m- and p- isomers)	0.77	3.2	2.82	0.75
<input type="checkbox"/>	O-cresol	0.11	5.6	See entry above	
<input type="checkbox"/>	Cyclohexanone	0.36	N/A	0.125	0.75
<input type="checkbox"/>	O-Dichlorobenzene	0.088	6.2	0.65	0.125
<input type="checkbox"/>	Ethyl acetate	0.34	33	0.05	0.75
<input type="checkbox"/>	Ethyl benzene	0.057	6.0	0.05	0.053
<input type="checkbox"/>	Ethyl ether	0.12	160	0.05	0.75
<input checked="" type="checkbox"/>	Isobutyl alcohol	5.6	170	5.0	5.0
<input checked="" type="checkbox"/>	Methanol	5.6	N/A	0.25	0.75
<input checked="" type="checkbox"/>	Methylene chloride	0.089	33	0.20	0.96
	Pharmaceutical Waste Water Subcategory			0.44 (CCW)	NA
<input checked="" type="checkbox"/>	Methyl ethyl ketone	0.28	36	0.05	0.75
<input checked="" type="checkbox"/>	Methyl isobutyl ketone	0.14	33	0.05	0.33
<input type="checkbox"/>	Nitrobenzene	0.068	14	0.66	0.125
<input type="checkbox"/>	Pyridine	0.014	16	1.12	0.33
<input type="checkbox"/>	Tetrachloroethylene	0.056	5.6	0.079	0.05
<input checked="" type="checkbox"/>	Toluene	0.08	28	1.12	0.33
<input checked="" type="checkbox"/>	1,1,1-Trichloroethane	0.054	5.6	1.05	0.41
<input type="checkbox"/>	1,1,2-Trichloroethane	0.030	7.6	0.030 (CCW)	7.6 (CCW mg/Kg)
<input type="checkbox"/>	1,1,2-Trichloro-1,2,2-Trifluoroethane	0.057	28	1.05	0.96
<input type="checkbox"/>	Trichloroethylene	0.054	5.6	0.062	0.091
<input type="checkbox"/>	Trichlorofluoromethane	0.02	33	0.05	0.96
<input checked="" type="checkbox"/>	Xylenes (Total)	0.32	28	0.05	0.15
		-----CCWE-----			
<input type="checkbox"/>	Carbon Disulfide	N/A	4.8		
<input type="checkbox"/>	Cyclohexanone	N/A	0.75		
<input type="checkbox"/>	Methanol	N/A	0.75		